



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

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Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or **Fax** (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

• CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590 12/10/2003

Laurence B Bond
Trask Britt
PO Box 2550
Salt Lake City, UT 84110

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO on the date indicated below.

Laurence B. Bond	(Depositor's name)
<i>Laurence B. Bond</i>	
(Signature)	
6 FEB. 2004	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/763,903	02/26/2001	LeVoy G. Haight	3746.1	3546

TITLE OF INVENTION: SELF-PRIMING DIALYSIS FILTER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	03/10/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
KIM, SUN U	1723	210-321720

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. TRASKBRITT

2. _____
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sorenson Development, Inc.

Salt Lake City, Utah, U.S.

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee
 Publication Fee
 Advance Order - # of Copies 10

A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-1469 (enclose an extra copy of this form).

Director for Patent is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)	(Date)
<i>Laurence B. Bond</i>	
6 FEB. 2004	

02/13/2004 MDAMTE2 00000224 09763903

01 FC:2501	665.00 OP
02 FC:8001	30.00 OP

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

LeVoy G. Haight

Serial No.: 09/763,903

Filed: February 26, 2001

For: SELF-PRIMING DIALYSIS FILTER

Confirmation No.: 3546

Examiner: S. Kim

Group Art Unit: 1723

Attorney Docket No.: 1950-3746.1US

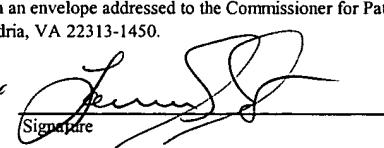
Notice of Allowance Mailed:

December 10, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence along with any attachments referred to or identified as being attached or enclosed is being deposited with the United States Postal Service as First Class Mail on the date of deposit shown below with sufficient postage and in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

6 Feb. 2004
Date


Signature

Laurence B. Bond
Name (Type/Print)

TRANSMITTAL LETTER

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant submits herewith Part B - Fee(s) Transmittal for the above-captioned application and a check in the amount of \$695.00 in payment therefore plus ten (10) copies of the patent when issued.

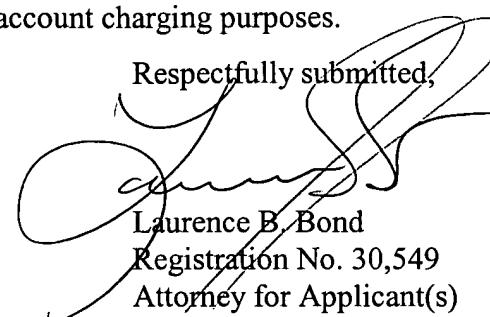
Please note that this application was filed as a small entity and the applicant continues to qualify as a small entity.

Applicant understands that no additional fees are required. However, if the Office determines that any comparison fees or other additional fees are required, the Commissioner is



authorized to charge any such fees to TraskBritt Deposit Account No. 20-1469. A copy of this Transmittal Letter is enclosed for deposit account charging purposes.

Respectfully submitted,


Laurence B. Bond
Registration No. 30,549

Attorney for Applicant(s)

TRASKBRITT

P.O. Box 2550

Salt Lake City, Utah 84110-2550

Telephone: 801-532-1922

Date: February 3, 2004

LBB/dh

Enclosures: Part B - Issue Fee Transmittal

Check No. 19856 in the amount of \$695.00

Copy of Transmittal Letter

Document in ProLaw